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Under the Pa	perwork Reduction Act o	respond to a collection of information unless it displays a valid OMB control number.						
Face = 1,100,100,100,160	Effective on 12/08	Complete if Known  Application Number 10/512,058-Conf. #8612						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2008						October 21, 2004		
						Foshio NOMURA		
						S. A. Broome		
Applicar	nt claims small entity sta			628				
Applicant claims small entity status. See 37 CFR 1.27				741 0111		0033-0960PUS1		
TOTAL AMOUNT OF PAYMENT (\$) 1,270.00				Attorney Docke	t No.	733-0900F 03 I		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	F	ILING FEES		ARCH FEES		ATION FEES		
Application T	ype Fee (	Small Entity  \$) Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
Utility	310		510	255	210	105	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		-
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity								
Fee DescriptionFee (\$)Fee (\$)Each claim over 20 (including Reissues)5025								
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)								25 105
								185
Total Claims	Extra Claims	Paid (\$)	Multiple Dependent Claims					
	- 30 =	Fee (\$)		mm ( <del>v</del> )			ee Paid (\$)	
	ber of total claims paid fo							
Indep. Claims	ep. Claims Extra Claims Fee (\$) Fee I		Paid (\$)				-	
11 -11= × = =								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = /50 = (round <b>up</b> to a whole number) x =								
4. OTHER FEE	,						Fees F	Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00 1252 Extension for response within second month 460.00								
SUBMITTED BY M. A. //								
Signature	Registration No. (Attorney/Agent) 39,491 Telephone (703) 205-8000							-8000
Name (Print/Type)	Michael R. Cammarata Date						December 19, 2007	